

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH  
SERVICE PLANNING AREA 5**

**QUALITY IMPROVEMENT COMMITTEE**

**November 02, 2010**

**AGENDA**

- |  |                |
|--|----------------|
| I. Welcome and Introductions                                   | Monika/Jessica |
| II. Review of Minutes  | All            |
| III. Program Announcements                                     | All            |
| • SA5 Agency Coordination Trouble Shooter                      |                |
| IV. DMH Updates  | Karen Williams |
| V. Quality Assurance   |                |
| • Auditor Controller -   | Sukeda Day     |
| DMH Contract Compliance Training                               | Nina Johnson   |
| • QA Bulletin No, 10-02, September 15, 2010                    | Monika/Jessica |
| California Code of Regulations (CCR) Changes                   |                |
| Which Alter the State DMH Audit Appeal Process                 |                |
| VI. Quality Improvement  | Monika/Jessica |
| • Quality Improvement Handbook, June 2010                      |                |
| • LAC-DMH QI Work Plan Goals for 2010                          |                |
| • Quality Improvement Program – Discussion of the              |                |
| Components of the QI Program regarding                         |                |
| Structure, Functions, Responsibilities, and Process            |                |
| VII. Policy/Procedure  |                |
| • Presentation regarding Policy No. 112.5                      | Rob Ulrich     |
| Contractors Eligibility to Provide Goods and Services          |                |
| to Federally Funded Health Care Programs and to                |                |
| Secure Federally Funded Contracts                              |                |
| • Policy No. 2.6 Obtaining Consent to Bill Medi-Cal            | Monika/Jessica |
| And/Or Other Private Insurance for Services to                 |                |
| AB3632 Clients   |                |
| • Policy No. 202.38 Non-Open Protected Health Information      |                |
| (PHI) File   |                |
| • Policy No. 202.39 Clinical Correspondence Concerning Clients |                |
| • Policy No. 202.40 Triage                                     |                |

VIII. Next QIC Meeting

Monika/Jessica

**The next Service Area 5 Quality Improvement Committee meeting will be held on Tuesday, January 11, 2011 at Didi Hirsch CMHC, 4760 S. Sepulveda Blvd. in Culver City from 9:00AM - 11:00AM.**

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH**  
**SA 5 Quality Improvement Committee**  
**Minutes**

Type of Meeting	Quality Improvement Committee	Date	November 2, 2010
Place	Didi Hirsch CMHC 4760 S. Sepulveda Blvd., Culver City	Start Time	9:00 AM
Chairperson	Monika Johnson; co-chair Jessica Wilkins	Adjournment	11:00AM
Members Present	Karen Williams, DMH; Monika Johnson, DMH; Jessica Wilkins, Alcott Center; Nilsa Gallardo, Edelman - Adult; Patrice Grant, Edelman – Child; Susan Houck Strom, Didi Hirsch; Matt Meyer, Didi Hirsch; Eloisa Ramos Robles, Exceptional Children's Foundation; LeeAnn Skorohod, Exodus Recovery; David Kneip, Exodus Recovery; Nicole Ryan, The HELP Group; Kevin Minor, Homes For Life Foundation; Amy Turk, OPCC; Martha Andreani, St. John's CDC; Barbara Blum, Step Up on Second; Loretta Herndon, St. Joseph Center; Dorothy Berndt, St. Joseph Center; Brenda Pitchford, UCLA Ties for Adoption; Cheryl Carrington, Vista Del Mar; Kathy Osburen, WISE & Healthy Aging; Rob Ulrich, DMH; Carolin Menasaghanian, DMH; Nina Johnson, DMH; Sukeda Day, DMH.		
Excused Members	Kristi Rangel, Alcott Center; Bonnie McRae, Edelman – Child; Rose Garcia, Didi Hirsch; Kathy Shoemaker, Exodus Recovery; Anahita Saadatfard, Homes for Life Foundation; Jamie Hayworth, Homes For Life Foundation; Nick Maiorino, St. Joseph's Center; Sharon Greene, St. John's CFDC; Kim Fuller, The Help Group; Paisha Allmendinger, UCLA Ties for Adoption; Susan Edelstein, UCLA Ties for Adoption; Jennifer Levine, WISE & Healthy Aging.		
Absent Members	Thang Nguyen, DMH; Yvette Willock, Pacific Clinics; Michi Okano, Pacific Asian Counseling Services.		
<b>Agenda Item &amp; Presenter</b>	<b>Findings and Discussion</b>	<b>Decisions/ and Recommendations/ Scheduled Actions/Scheduled Task</b>	<b>Person Responsible/Due Date</b>
<b>Call to Order &amp; Introductions</b>	The meeting was called to order at 9:00 a.m.	Introductions were made	Monika Johnson QIC Membership
<b>Review of Minutes and Handouts</b>	Minutes were reviewed and approved for September, 2010.	Final approved Minutes for July, 2010 were distributed.	QIC Membership
	Trouble Shooter Roster was updated.		Monika Johnson

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
DMH Update	<ul style="list-style-type: none"><li>Karen reported that with the implementation of Evidence Based Practices (EBP), many providers were interested in including Managing &amp; Adapting Practice (MAP) in their Plan. With the advocacy by the Department, the State approved the inclusion of MAP, and the DMH has agreed to increase the percentages of PEI funding which can be allocated to this specific EBP from 20% to 40%.</li></ul>		Karen Williams
Quality Assurance	<ul style="list-style-type: none"><li>CCCP Training Module Review and Follow-up w/ Survey Report from QIC Members</li></ul> <p>Monika had distributed the CCCP Training Model surveys to QIC members per e-mail with the request to bring the completed surveys to this QIC Meeting.</p>	<p>Some Members submitted the surveys; others will send them by mail.</p> <p>Monika will follow-up w/ Jennifer Eberle regarding the feedback by providers.</p>	QIC Members

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
<p><b>Quality Assurance</b></p>	<ul style="list-style-type: none"> <li>QA Bulletin No. 10-02, September 15, 2010 California Code of Regulations (CCR) Changes Which Alter the State DMH Audit Appeal Process.</li> <li>Auditor Controller – DMH Contract Compliance Training</li> </ul> <p>Sukeda and Nina conducted the Compliance Training and provided opportunities for questions and answers.</p> <p>Provider Question: Your expectation is to write the diagnosis at the bottom of the Assessment Update whereas we were informed by the QA Division that the diagnosis should only be written on the Initial Clinical Assessment and the Diagnosis Information form. Can you explain the discrepancy between the Auditor Controller Office and the QA division, and how we should proceed?</p> <p>Auditor Controller Answer: The diagnosis needs to be on the Assessment Update, and if it is not it will be an audit finding.</p>	<p>Monika and Jessica distributed copies of the QA Bulletin and asked Providers to read it.</p> <p>Sukeda and Nina distributed copies of a power point presentation regarding common findings and expectations associated w/ contract compliance.</p> <p>It was agreed Sukeda Day, Nina Johnson and Karen Williams will follow up w/ Norma regarding the discrepancy.</p>	<p>Members</p> <p>Sukeda Day Nina Johnson</p> <p>Sukeda Day Nina Johnson Karen Williams</p>

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
<b>Quality Improvement</b>	<ul style="list-style-type: none"> <li>Quality Improvement Program Monika announced that it was necessary to postpone the planned review of the QI Handbook and discussion by the QIC membership about the distinction between QI and QA, and the components, functions, and processes of the QI program due to the limited time available in today's meeting. In the interim, Jessica gave a brief description and overview of the difference between Quality Assurance and Quality Improvement and referenced pages 3 &amp; 4 (CA MH Planning Council, May 2005) in the QI Handbook.</li> <li>QI Presentation Rob Ulrich from the Compliance Program gave a presentation on compliance issues; he provided an overview of the Compliance Program at DMH with an emphasis on how to review the eligibility status of rendering providers.</li> </ul>	<p>Monika distributed the QI Handbook per e-mail on June 16, 2010. Providers had been asked to read the Handbook and planned to have a group discussion in the SA5 QIC to follow up with any questions. Monika requested that QIC members bring the QI Handbook for review to the next SA 5 QIC Meeting. She will send a reminder prior to the next meeting.</p>	<p>Monika Johnson Jessica Wilkins</p> <p>QIC Members</p>

# QIC Meeting

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Quality Improvement	<p>Rob distributed the following handouts:</p> <ul style="list-style-type: none"> <li>➤ Policy No. 112.5 Contractors Eligibility to Provide Goods and Services to Federally Funded Health Care Programs and to Secure Federally Funded Contracts</li> <li>➤ Overview of Federal and State Sanction Lists and Why They Must be Routinely Searched</li> <li>➤ Sanction List Reviews by Entity Contractors (9 pages)</li> <li>➤ Medi-Cal Suspended % Ineligible List Search Application, System Administrators Instructions, Suspended File (5 pages).</li> </ul> <p>Provider Question: Is the policy saying that all employees need to be screened or only those providing client services?</p> <p>Provider Question: Should we have a compliance discussion in the SAS QIC to compare how we are meeting these requirements?</p>	<p>Rob clearly defined the parameters of his role and distributed all the handouts associated w/ the compliance presentation.</p> <p>Answer: Rob suggested that the policy includes all staff, including those not providing services and board members.</p> <p>Answer: The group decided that interested parties should have the discussion separate from the QIC meeting.</p>	QIC Members

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
<b>Quality Improvement</b>	<ul style="list-style-type: none"> <li>• Policy/Procedure Monika reminded QIC Members that she sent the following policies per e-mail:               <ul style="list-style-type: none"> <li>➤ Policy No. 2.6 Obtaining Consent to Bill Medi-Cal and/Or Other Private Insurance for Services to AB3632 Clients</li> <li>➤ Policy No. 202.38 Non-Open Protected Health Information (PHI) File</li> <li>➤ Policy No. 202.39 Clinical Correspondence Concerning Clients</li> <li>➤ Policy No. 202.40 Triage</li> </ul> </li> </ul> <p>Monika referenced the following policies:</p> <ul style="list-style-type: none"> <li>➤ Policy No. 202.21 Language Interpreters</li> <li>➤ Policy No. 104.8 Clinical Record Guidelines: Contents and General Documentation Requirements.</li> </ul>	<p>Monika and Jessica distributed hard copies of the Policy/Procedures.</p> <p>Providers will review and implement the policies.</p>	<p>QIC Members</p>

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
	<p>Monika explained that in the Clinical Assessment Training on October 26, 2010, Jennifer Eberle said that the presence of an interpreter needs to be documented in every progress note. Although this requirement is not directly referenced in these policies, providers were encouraged to follow this suggestion. According to Jennifer Eberle, the policies may be revised in the near future to reflect this requirement.</p>	<p>LACDMH plans to develop new policies to reflect this practice.</p>	<p>Jen Eberle</p>
	<p>Monika informed QIC Members that the Access Center will provide an interpreter upon request in the requested threshold language. The Access Center will provide immediately the services whereby an interpreter will be available per conference call. In case providers need to request an interpreter for face-to-face contact, the Access Center will refer the provider to the DMH website (Multilingualistic MH services) where contacts (Directly Operated Clinics and Contract Providers) with interpretive services are listed.</p>	<p>A Provider reported that they called the Access Center for an ASL interpreter and that they have had the interpreter coming to their agency to provide this service.</p>	<p>Providers</p>

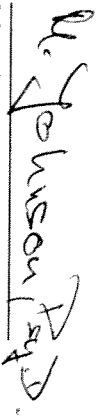
QIC Meeting

Date: November 11, 2010

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Next Meeting	The next Service Area 5 Quality Improvement Committee meeting will be held on Tuesday, January 11, 2011 at Didi Hirsch CMHC, 4760 S. Sepulveda Blvd. in Culver City from 9:00AM – 11:00AM.	N/A	N/A

Respectfully Submitted,

  
Monika Johnson, Psy.D.

  
Jessica Wilkins, MFT